

## CORE 40 WITH TECHNICAL HONORS AND ACADEMIC HONORS UPDATE SYSTEM (CHIPS) VERIFICATION FORM FOR THE FRANK O'BANNON GRANT PROGRAM

2012-13 ACADEMIC YEAR State Form 52021 (R8/6-11)

STATE OF INDIANA STATE STUDENT ASSISTANCE COMMISSION OF INDIANA (SSACI)

This agency is requesting disclosure of your Social Security Number in accordance with IC 4-1-8-1; disclosure is mandatory and this record will not be processed without it.

## Parents should keep a copy of this form

Students who file the 2012-13 Free Application for Federal Student Aid (FAFSA) by the State Student Assistance Commission of Indiana's (SSACI) March 10, 2012 receipt date deadline and qualify for SSACI's need-based Frank O'Bannon Grant may receive additional need-based Frank O'Bannon Grant funds. In order to qualify, the student must earn the Core 40 with Technical Honors (TH) or Academic Honors Diploma (AH) from an Indiana Department of Education accredited high school.

In addition to filing the 2012-13 FAFSA by the March 10, 2012 receipt date deadline, completion of this verification form may be required by your child's high school to collect and release the necessary diploma information to SSACI and the colleges and universities to which he or she has applied for admission and financial aid. This form must be completed and returned to your child's

	date of It is your responsible additional TH or AH need-based Frank O'Bannon Grant f			deadlines. Failure to do so wi	Il prevent your child from being
After April 1, 2012 guidance office.	2 check your child's record at the SSACI eStudent web site	e, www.ssaci.in.gov/estude	ent/. Make sure your child	s diploma status is correctly	reported. If not, contact the high school
	responsibility to file the 2012-13 FAFSA by the March 1 H information reported by the high school is correct. A essing aid.				
Parent Release:	I authorize the release of my child's name, date of birth and Social Security Number to SSACI so that he or she can be considered for the additional TH or AH need-based Frank O'Bannon Grant funds. I understand that this information will only be released if needed to SSACI, qualified colleges and universities, the Indiana Commission for Higher Education and the Indiana Department of Education for purposes of determining financial aid eligibility and evaluating graduation and completion data.				
	Parent Signature (Mandatory)		Parent Name (Please Print)		
Student Name, Social Security Number, and Date of Birth: (Mandatory) PLEASE PRINT	Student Last Name (as it appears on Social Security Card)		Student First Name (as it app	pears on Social Security Card)	Accuracy is essential  – check the student's Social Security Card to be sure the correct SSN is provided
	Student Social Security Number (as it appears on Social Security Ca	rd)	Student Date of Birth (MM/L	DD/YYYY as it appears on birth cert.	ificate)
FOR MORE INFORMATION ABOUT STATE GRANT PROGRAMS, VISIT THE SSACI WEB SITE: http://www.ssaci.IN.gov					
The following section to be completed by high school representative. This form to be kept on file at the high school and not returned to SSACI.					
School Name:					Diploma Type Verification <u>Check only one</u>
Authorized Signature:	Based on seventh semester grades I certify that the information on to with either an Academic Honors Diploma (AD) or a Core 40 Diploma	true and accurate for this student who is expected to graduate		O Core 40 with Technical Honors (TH) O Academic Honors (AH)	
	Name of Authorized School Representative	Signature		Date (MM/DD/YYYY)	